



PART B - FEE(S) TRANSMITTAL

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STEPHEN R MAY INTELLECTUAL PROPERTY SERVICES BATTELLE MEMORIAL INSITUTE PACIFIC NORTHWEST DIVISION RICHLAND, WA 99352

Certificate of Mailing or Transmission I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Box Issue Fee address above, or being facsimile transmitted to the USPTO, on the date indicated below.

Rebecca B. Rupp (Depositor's name) Rebecca B. Rupp (Signature) September 27, 2002 (Date)

Table with 5 columns: APPLICATION NO. (09/375,614), FILING DATE (08/17/1999), FIRST NAMED INVENTOR (ANNA LEE Y. TONKOVICH), ATTORNEY DOCKET NO. (B-1479), CONFIRMATION NO. (5345)

TITLE OF INVENTION: CHEMICAL REACTOR AND METHOD FOR GAS PHASE REACTANT CATALYTIC REACTIONS

Table with 6 columns: APPLN. TYPE (nonprovisional), SMALL ENTITY (XXBSX No), ISSUE FEE (X68X \$1280), PUBLICATION FEE (\$0), TOTAL FEE(S) DUE (X68X \$1280), DATE DUE (09/27/2002). Includes EXAMINER (LANGEL, WAYNE A), ART UNIT (1754), CLASS-SUBCLASS (208-108000)

- 1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363). [] Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached. [] "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47) attached. Use of a Customer Number is required. 2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed. Stephen R. May, Frank S. Rosenberg

3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type) PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. Inclusion of assignee data is only appropriate when an assignment has been previously submitted to the USPTO or is being submitted under separate cover. Completion of this form is NOT a substitute for filing an assignment. (A) NAME OF ASSIGNEE: Battelle Memorial Institute (B) RESIDENCE: (CITY and STATE OR COUNTRY): Richland, WA 99352

Please check the appropriate assignee category or categories (will not be printed on the patent) [] individual [X] corporation or other private group entity [] government

4a. The following fee(s) are enclosed: [X] Issue Fee [] Publication Fee [] Advance Order - # of Copies 18 4b. Payment of Fee(s): [X] A check in the amount of the fee(s) is enclosed. [] Payment by credit card. Form PTO-2038 is attached. [X] The Commissioner is hereby authorized by charge the required fee(s), or credit any overpayment, to Deposit Account Number 02-1275 (enclose an extra copy of this form).

Commissioner for Patents is requested to apply the Issue Fee and Publication Fee (if any) or to re-apply any previously paid issue fee to the application identified above.

(Authorized Signature) Stephen R. May (Date) 17 Sept 2002

10/04/2002 BNGUYEN2 00000014 021275 09375614 01 FC:142 1280.00 CH 02 FC:361 54.00 CH

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